

ART. XIV.—*Results of Fifteen Operations for Lithotomy.* By P. C. SPENCER, M. D., of Petersburg, Virginia.

IN the following operations, performed within the last fifteen years, in Petersburg, Va., the instrument used was the lithotome caché, or the bilateral improved instrument of Baron Dupuytren.

CASE I. A free boy, four years of age, was operated on in September, 1833. Drs. Theophilus F. Gilliam and Birchett were present. From some unknown cause he died in the course of the night. His parents refusing positively to allow any kind of examination to be made, and as the loss of blood was very inconsiderable and nothing unusual occurred in the operation, we were totally at a loss how to account for his death, unless it was from a nervous shock given to the system. The calculus extracted was about the size of a pigeon's egg.

CASE II. Mr. Edward Ragsdale, of Virginia, aged seventeen years, was operated on October 1st, 1835. Drs. L. White, of Petersburg, and Morrison, of Brunswick county, assisted in this operation. We found a very large calculus incised a little behind and laterally to the prostate gland, and so completely imbedded as to require considerable force to separate it from the wall of the bladder.

This operation was performed about fifty miles out of town, and I was unable to see the patient as often as I wished. For a few days after the operation the case appeared as though it would do well. Later, however, he fell back, and steadily declined, and died on the fourteenth day. This result was not altogether unexpected, and was attributed to the great delay on the part of the patient in assenting to the operation, his weak condition, and the severity of the cystic irritation, which had so long existed; for he would only submit to the knife in the last extremity.

CASE III. A slave, aged thirty-five years, operated on in May, 1837. After the result of the two previous cases, I invariably placed the patient under preparatory treatment, varying the treatment according to the circumstances, and witnessed the happiest results. In this operation I was assisted by Dr. L. White and several students of medicine. We removed a very large calculus. The patient passed his urine naturally on the eighth day, had no fever of consequence, was walking about on the twentieth day, and in the course of a month returned home cured.

CASE IV. A slave, aged eighteen years, was operated on May 16th, 1837. In this operation I was assisted by Dr. L. White. We removed a very large number of calculi, which we found this bladder contained, many of which were so fragile that they were broken to pieces in attempting to bring them away. This patient, much to my astonishment, but more to my pleasure, passed his urine naturally on the fifteenth day, had no fever of consequence, but little after treatment, and returned home about the fortieth day cured.

CASE V. J. L. Long, of Virginia, aged seven years, was operated on November 21st, 1838. I was assisted in this operation by Drs. L. White, Cox, Michie, and several students of medicine. We removed a calculus of medium

size. On the fifth day he passed his urine naturally. His recovery was rapid, and he returned home on the twenty-fifth day cured.

CASE VI. Ripley Maggett, of Virginia, aged nine years, was operated on in May, 1839. Drs. Robinson, White, and Jones assisted in this operation. I made an opening into the rectum, and found it exceedingly difficult to effect a union of the parts. The only remedy resorted to was the solid stick of lunar caustic, introduced into the rectum on the finger of the left hand, an operation which I found necessary to be exactly repeated every thirty-six hours, for if I waited forty hours, his evacuations would pass through the cut, sometimes feces and urine commingled. The after treatment was more protracted than in any previous case. He returned home in about forty days, but with occasionally some moisture of the parts. He finally recovered, and his health has been perfectly restored.

CASE VII. Slave Ambrose, aged five years, was operated on June 1st, 1840. Drs. White, Michie, and Jones assisted in this operation. We removed a calculus of more than ordinary size. He passed his urine naturally on the tenth day, and on the thirtieth returned home cured. Nothing unusual occurred in the case.

CASE VIII. James Wells, of Virginia, aged four years, was operated on in September, 1844. In this operation I was assisted by Drs. White, Jones, and Coneh. He passed his urine naturally on the eighth day, was walking about on the fifteenth, and returned home cured on the thirtieth day.

CASE IX. Mr. H. Hardy, of North Carolina, aged eighteen years, was operated on November 21st, 1844. The necessary preparatory treatment was administered by Drs. Johnson and Cross, of the neighbourhood, when I visited him, attended by my friend Dr. J. F. Peebles, who assisted, in conjunction with the two gentlemen above named, in the operation. We removed an uncommonly large calculus. Although the operation was performed with our usual caution, and in the same manner as heretofore, yet the pudic artery was unfortunately wounded. It is perhaps worthy of remark that this accident did not at once manifest itself. It was only after the patient had been cleansed and replaced in bed that hemorrhage came on. After, in quick succession, he had discharged several coagula of blood of the full size and shape of the bladder, which he voided, impelled by a desire to urinate, symptomatic of sinking to such an alarming extent came on that it became necessary to replace him once more on the table, with the view of arresting the hemorrhage. Whilst preparing a tent for this purpose, Dr. C. Cross inserted his finger into the wound, and feeling the jet of blood impinging against it, suddenly made pressure on the spot. The manœuvre was eminently successful. It was soon found that he had the bleeding entirely under control. Other measures were at once abandoned for this simple yet direct procedure. With unflagging zeal, altogether above all praise, Dr. C., despite the discomfort of his position, steadily maintained the pressure on the wounded vessel for five or six hours, when, gradually withdrawing his hand, we found that all bleeding had ceased. A sponge was then introduced on a cannula, which was saturated with a solution of creasote, and allowed to remain until suppuration took place.

The weak state of the patient, combined with much cystic irritation, which continued for some time, rendered his condition extremely precarious for

several weeks. Under appropriate local and general treatment, however, he gradually gained and finally was perfectly re-established in health.

CASE X. Mr. J. R. Lunsford, of Virginia, aged twenty-seven years, was operated on January 17th, 1845. Drs. White, Jones, Couch, and Strachan aided in this operation. We removed two calculi, one of more than ordinary size, lying just in front of the prostate gland, the other in the bladder. Finding two, either over the common size, I examined very minutely with the finger and the instruments but found no other. I then proceeded to wash out the bladder with warm water and Castile soap, and replaced him in bed. He rallied at once, and was restored to complete health in an unusually short time. He passed his urine naturally on the tenth day, and returned home on the twenty-fifth day.

CASE XI. Master Rufus Stallings, of North Carolina, aged four years, was operated on May 18th, 1847. I was assisted in this operation by Drs. J. F. Peebles, White, and Thweatt. The calculus was removed, and he commenced passing his urine naturally the next morning. On the third day he passed all his urine per urethra, and returned to the interior of North Carolina on the nineteenth day from the operation, in fine health and condition.

CASE XII. Cornelius, a slave, four years of age, was operated on May 31st, 1848. Drs. Peebles, White, Withers, and Thweatt assisted in this operation. The calculus was removed, and he commenced passing his urine naturally on the fifth day, recovered his health rapidly, and returned home on the twenty-fifth day well.

CASE XIII. Master Louis Blitz, of Virginia, aged seven years, was operated on March 25th, 1849. I was aided in this operation by Drs. White, Michie, Couch, and Hinton. We removed rather a small calculus. The health of this patient was extremely low, and his recovery gradual until the tenth day, when he commenced passing his urine naturally; from that time he recovered rapidly, and returned home on the thirtieth day from the operation in good health.

CASE XIV. William, a slave from Williamsburg, Virginia, aged four years, was operated on April 29th, 1849. In this operation I was assisted by Drs. Peebles, Michie, Withers, Couch, and Durkin. We removed an uncommonly large calculus from the bladder, measuring one and a half inch in length, and large in proportion. The little boy had suffered from birth, and had become so much emaciated and relaxed as to render the operation most difficult. After the first cut of the scalpel, such immense relaxation and prostration of the lining membrane of the rectum took place, that I was compelled to lay the bistoury down frequently to replace the protruded membrane before I could complete the necessary section to get in the groove of the staff. In the progress of the operation, I unavoidably cut into the rectum as I apprehended. Having committed the same error in the sixth case, or operation on R. Maggett, I at first feared much trouble, but suggested to my friend Dr. Peebles the propriety of locking up the bowels, with some preparation of opium, and permit the small opening in the rectum to heal as speedily as possible. To our astonishment and gratification, in a few days the part had healed and become firm, and on the fourth day he passed his urine naturally. Recovery in this case was as speedy as in any I had ever known. On

the twenty-second day from the operation he returned to his home in Williamsburg, full of life and health.

The above mode of treatment I have since ascertained, first suggested, I believe, by M. Chomel, of Paris, is now generally employed in cases of intestinal perforation occurring in typhoid fever. It is certainly applicable to all cases of wounded intestines, and I perceive that Dr. Gerhard also recommends it in pneumothorax.

CASE XV. Mr. A. Wells, of Virginia, aged twenty-eight years, was operated on September 23d, 1849. I was assisted in this operation by Drs. Couch, Peebles, Hinton, and Rives. We removed a calculus weighing five hundred and sixty-three grains. The enormous size of the stone considered, it was with no little surprise and pleasure that we found him passing his urine naturally on the eleventh day. His general health improved rapidly, and the only after treatment pursued was the infusion of buchu through the day and a good and nourishing diet. It may be proper to remark here, that the external incision did not heal as rapidly as we anticipated. The healing process was very gradual, and it was not until the caustic had been several times applied that we could get the part to heal completely.

Recapitulation of the Fifteen Cases.

1st case	died in the course of	12 hours.
2d do.	" " " "	14 days.
3d do.	urinated naturally on the	8th day.
4th do.	" " "	15th day.
5th do.	" " "	5th day.
7th do.	" " "	10th day.
8th do.	" " "	8th day.
10th do.	" " "	10th day.
11th do.	" " "	3d day.
12th do.	" " "	5th day.
13th do.	" " "	10th day.
14th do.	" " "	4th day.
15th do.	" " "	11th day.

In the 6th and 14th cases the rectum was cut. In the 9th case the pudic artery was divided.

Of the 15 cases, 9 were whites, all males; 3 boys, 4 nearly grown, and 2 over 21 years of age. The number of blacks 6, 4 boys and 2 men.

ART. XV.—*Displacement of the Heart from Atrophy of the Left Lung.* By C. J. CLARK, M. D. of Jacksonville, Alabama.

LAENNEC enumerates as causes of displacement of the heart, a solid, liquid, or seriform effusion into either sac of the pleura, extensive tumours in the lungs, emphysema of this organ, and alludes to a prolapsus of the heart without any visible cause.

Dr. Townsend (*Cyclopædia Pract. Med.*) lays down as causes of displacement, 1st, effusion into the sack of the pleura; 2d, aneurism of the aorta;